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APPLICANTS

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** CONTINUING DATA ***** *Yes* *PR*
This application is a CON of 09/021,804 02/11/1998 ABN
which claims benefit of 60/047,749 05/27/1997

** FOREIGN APPLICATIONS ***** *None* *PR*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 10	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials <i>PR</i>		

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23122
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TITLE
Stent and stent-graft for treating branched vessels

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees
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